10/15/21, 10:26 AM

Division of Corporations

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Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (614)280-3338 Fax Number : (954)208-0845

**Enter the email address for this business entity to be used for futo annual report mailings. Enter only one email address please.*

Email Address:_

LLC REGISTERED AGENT CHANGE UNITED LAND SERVICES OPERATING LLC

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Corporate Filing Menu

Help

From: Kaity Toon

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	me of the limited liability company: United Land Servi	ices Ope	rating LLC	
~. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_		failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	12276 San Jose Blvd,747		12276 San	Jose Blvd,747
	Jacksonville, FL 32223		Jacksonvill	c, FL 32223
	August 7, 2020		M20000007-	175
3.	Date of filing/registration in Florida	4.		Document number
5. (a)				
J. (a)	Registered Agent and Registered Office shown on the records of t	he Florid	a Dept. of State	20:
	Williams, William J.			2021 OCT 15 **ECRETATION TAIL!/ \$15
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
	1200 S Pine Island Rd			5 5
	Plantation FL	33324		NH 10: 2:
	, 14.			0 4
(b)				10
,	Enter name of NEW Registered Agent and/or NEW Registered	Office ac	ldress:	7
	C T Corporation System			
	NEW Registered Office Address:			
	1200 South Pine Island Road			
	M. A. C	22234		
	Plantation , FL			
change agent v was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	register bility co f the lim limited	ed office and empany, it is nited liability liability com	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
Signa	ture of a member of authorized representative of a member			Printed or typed name of signee
I here provisi the obli	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete igutions of my position as registered agent as provided by reflect a change in the registered office address, I have a first change.	nerjorm i for in (nereby c	ance of my a Chapter 605, onfirm that t	city. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been